

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A

PAYMENT ISSUE DATE: 02/15/2013

ALAMEDA COUNTY TREASURER

1221 OAK ST

OAKLAND

CA 94612

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 To 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 9,579,431.72

Gross Claim \$9,579,431.72

Net Claim / Payment Amount \$9,579,431.72

YTD Amount: \$38,334,451.44

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A

PAYMENT ISSUE DATE: 02/15/2013

ALPINE COUNTY TREASURER

PO BOX 217

MARKLEEVILLE

CA 96120

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 To 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 244,214.91

Gross Claim \$244,214.91

Net Claim / Payment Amount \$244,214.91

YTD Amount: \$977,286.02

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A
PAYMENT ISSUE DATE: 02/15/2013

AMADOR COUNTY TREASURER
810 COURT ST

JACKSON

CA 95642

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 To 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 439,599.70

Gross Claim \$439,599.70

Net Claim / Payment Amount \$439,599.70

YTD Amount: \$1,759,166.29

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A
PAYMENT ISSUE DATE: 02/15/2013

BERKELEY CITY TREASURER
2081 CENTER STREET

BERKELEY CA 94704

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 **To** 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 811,664.04

Gross Claim **\$811,664.04**

Net Claim / Payment Amount **\$811,664.04**

YTD Amount: **\$3,248,073.21**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A

PAYMENT ISSUE DATE: 02/15/2013

BUTTE COUNTY TREASURER

25 COUNTY CENTER DR

OROVILLE

CA 95965

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 **To** 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 1,566,805.40

Gross Claim **\$1,566,805.40**

Net Claim / Payment Amount **\$1,566,805.40**

YTD Amount: **\$6,269,957.05**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A

PAYMENT ISSUE DATE: 02/15/2013

CALAVERAS COUNTY TREASURER
GOVERNMENT CENTER

SAN ANDREAS

CA 95249

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 **To** 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 475,331.35

Gross Claim **\$475,331.35**

Net Claim / Payment Amount **\$475,331.35**

YTD Amount: **\$1,902,155.27**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A
PAYMENT ISSUE DATE: 02/15/2013

COLUSA COUNTY TREASURER
546 JAY ST

COLUSA

CA 95932

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 To 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 395,822.07

Gross Claim **\$395,822.07**

Net Claim / Payment Amount **\$395,822.07**

YTD Amount: **\$1,583,979.34**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A

PAYMENT ISSUE DATE: 02/15/2013

CONTRA COSTA COUNTY TREASURER

625 COURT ST RM 102

MARTINEZ

CA 94553

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 To 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 6,085,154.84

Gross Claim \$6,085,154.84

Net Claim / Payment Amount \$6,085,154.84

YTD Amount: \$24,351,243.32

For assistance, please call: John Bodolay at (916) 323-2154

2/13/2013

Page 8 of 59

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A

PAYMENT ISSUE DATE: 02/15/2013

DEL NORTE COUNTY TREASURER

981 H ST STE 150

CRESCENT CITY

CA 95531

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 To 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 416,639.87

Gross Claim \$416,639.87

Net Claim / Payment Amount \$416,639.87

YTD Amount: \$1,667,286.89

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A

PAYMENT ISSUE DATE: 02/15/2013

EL DORADO COUNTY TREASURER

360 FAIR LN

PLACERVILLE

CA 95667

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 To 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 1,088,946.46

Gross Claim \$1,088,946.46

Net Claim / Payment Amount \$1,088,946.46

YTD Amount: \$4,357,687.00

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A

PAYMENT ISSUE DATE: 02/15/2013

FRESNO COUNTY TREASURER

PO BOX 1406

SACRAMENTO

CA 95812

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 To 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 6,588,940.31

Gross Claim \$6,588,940.31

Net Claim / Payment Amount \$6,588,940.31

YTD Amount: \$26,367,264.74

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A

PAYMENT ISSUE DATE: 02/15/2013

GLENN COUNTY TREASURER
516 WEST SYCAMORE STREET

WILLOWS

CA 95988

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 To 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 418,891.68

Gross Claim \$418,891.68

Net Claim / Payment Amount \$418,891.68

YTD Amount: \$1,676,298.05

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A
PAYMENT ISSUE DATE: 02/15/2013

HUMBOLDT COUNTY TREASURER
825 FIFTH ST RM 125

EUREKA

CA 95501

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 To 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 966,345.00

Gross Claim \$966,345.00

Net Claim / Payment Amount \$966,345.00

YTD Amount: \$3,867,067.12

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A

PAYMENT ISSUE DATE: 02/15/2013

IMPERIAL COUNTY TREASURER

940 WEST MAIN ST

EL CENTRO

CA 92243 2863

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 To 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 1,331,295.13

Gross Claim \$1,331,295.13

Net Claim / Payment Amount \$1,331,295.13

YTD Amount: \$5,327,504.82

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A

PAYMENT ISSUE DATE: 02/15/2013

INYO COUNTY TREASURER

PO BOX 0

INDEPENDENCE

CA 93526

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 To 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 282,530.38

Gross Claim \$282,530.38

Net Claim / Payment Amount \$282,530.38

YTD Amount: \$1,130,614.79

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A

PAYMENT ISSUE DATE: 02/15/2013

KERN COUNTY TREASURER

PO BOX 981240

SACRAMENTO

CA 95798 1240

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 To 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 5,686,532.07

Gross Claim \$5,686,532.07

Net Claim / Payment Amount \$5,686,532.07

YTD Amount: \$22,756,056.30

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A

PAYMENT ISSUE DATE: 02/15/2013

KINGS COUNTY TREASURER

PO BOX 1406

SACRAMENTO

CA 95812 1406

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 To 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 1,118,691.15

Gross Claim \$1,118,691.15

Net Claim / Payment Amount \$1,118,691.15

YTD Amount: \$4,476,717.69

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A

PAYMENT ISSUE DATE: 02/15/2013

LAKE COUNTY TREASURER
255 NORTH FORBES ST RM 215

LAKEPORT

CA 95453

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 To 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 554,238.18

Gross Claim \$554,238.18

Net Claim / Payment Amount \$554,238.18

YTD Amount: \$2,217,920.37

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A
PAYMENT ISSUE DATE: 02/15/2013

LASSEN COUNTY TREASURER
COUNTY COURTHOUSE RM 103

SUSANVILLE

CA 96130

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 To 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 417,298.54

Gross Claim \$417,298.54

Net Claim / Payment Amount \$417,298.54

YTD Amount: \$1,669,922.72

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A
PAYMENT ISSUE DATE: 02/15/2013

LOS ANGELES COUNTY TREASURER
PO BOX 1859

SACRAMENTO

CA 95812

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 To 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 76,488,883.03

Gross Claim \$76,488,883.03

Net Claim / Payment Amount \$76,488,883.03

YTD Amount: \$306,089,072.75

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A

PAYMENT ISSUE DATE: 02/15/2013

MADERA COUNTY TREASURER

C/O BANK OF AMERICA

PO BOX 1859

SACRAMENTO

CA 95812 1859

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 **To** 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 1,171,671.45

Gross Claim **\$1,171,671.45**

Net Claim / Payment Amount **\$1,171,671.45**

YTD Amount: **\$4,688,731.41**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A
PAYMENT ISSUE DATE: 02/15/2013

MARIN COUNTY TREASURER

PO BOX 4220
CIVIC CENTER
SAN RAFAEL

CA 94913

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 **To** 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 1,517,916.36

Gross Claim **\$1,517,916.36**

Net Claim / Payment Amount **\$1,517,916.36**

YTD Amount: **\$6,074,315.54**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A

PAYMENT ISSUE DATE: 02/15/2013

MARIPOSA COUNTY TREASURER

PO BOX 36

MARIPOSA

CA 95338

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 To 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 284,699.18

Gross Claim \$284,699.18

Net Claim / Payment Amount \$284,699.18

YTD Amount: \$1,139,293.79

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A
PAYMENT ISSUE DATE: 02/15/2013

MENDOCINO COUNTY TREASURER
501 LOW GAP RD 1060

UKIAH

CA 95482

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 **To** 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 674,285.28

Gross Claim **\$674,285.28**

Net Claim / Payment Amount **\$674,285.28**

YTD Amount: **\$2,698,318.34**

For assistance, please call: John Bodolay at (916) 323-2154

2/13/2013

Page 24 of 59

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A

PAYMENT ISSUE DATE: 02/15/2013

MERCED COUNTY TREASURER

PO BOX 981311

WEST SACRAMENTO

CA 95798 1311

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 To 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 1,971,441.90

Gross Claim \$1,971,441.90

Net Claim / Payment Amount \$1,971,441.90

YTD Amount: \$7,889,209.51

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A
PAYMENT ISSUE DATE: 02/15/2013

MODOC COUNTY TREASURER
204 COURT ST RM 101

ALTURAS

CA 96101

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 **To** 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 265,501.29

Gross Claim **\$265,501.29**

Net Claim / Payment Amount **\$265,501.29**

YTD Amount: **\$1,062,468.67**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A

PAYMENT ISSUE DATE: 02/15/2013

MONO COUNTY TREASURER

PO BOX 495

BRIDGEPORT

CA 93517

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 To 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 276,899.53

Gross Claim \$276,899.53

Net Claim / Payment Amount \$276,899.53

YTD Amount: \$1,108,081.57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A

PAYMENT ISSUE DATE: 02/15/2013

MONTEREY COUNTY TREASURER

PO BOX 1406

SACRAMENTO

CA 95812 1406

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 To 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 3,140,036.87

Gross Claim \$3,140,036.87

Net Claim / Payment Amount \$3,140,036.87

YTD Amount: \$12,565,629.61

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A

PAYMENT ISSUE DATE: 02/15/2013

NAPA COUNTY TREASURER

1195 THIRD ST RM 108

NAPA

CA 94559 3035

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 **To** 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 902,076.22

Gross Claim **\$902,076.22**

Net Claim / Payment Amount **\$902,076.22**

YTD Amount: **\$3,609,879.81**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A
PAYMENT ISSUE DATE: 02/15/2013

NEVADA COUNTY TREASURER
PO BOX 128

NEVADA CITY

CA 95959

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 To 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 738,331.82

Gross Claim **\$738,331.82**

Net Claim / Payment Amount **\$738,331.82**

YTD Amount: **\$2,954,616.32**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A

PAYMENT ISSUE DATE: 02/15/2013

ORANGE COUNTY TREASURER

PO BOX 981024

WEST SACRAMENTO

CA 95798 1024

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 To 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 21,765,999.37

Gross Claim \$21,765,999.37

Net Claim / Payment Amount \$21,765,999.37

YTD Amount: \$87,101,998.34

For assistance, please call: John Bodolay at (916) 323-2154

2/13/2013

Page 31 of 59

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A
PAYMENT ISSUE DATE: 02/15/2013

PLACER COUNTY TREASURER

2976 Richardson Dr.

Auburn

CA 95603

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 **To** 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 1,828,239.51

Gross Claim **\$1,828,239.51**

Net Claim / Payment Amount **\$1,828,239.51**

YTD Amount: **\$7,316,149.92**

For assistance, please call: John Bodolay at (916) 323-2154

2/13/2013

Page 32 of 59

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A
PAYMENT ISSUE DATE: 02/15/2013

PLUMAS COUNTY TREASURER
PO BOX 176

QUINCY

CA 95971

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 To 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 383,542.91

Gross Claim \$383,542.91

Net Claim / Payment Amount \$383,542.91

YTD Amount: \$1,534,841.27

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A

PAYMENT ISSUE DATE: 02/15/2013

RIVERSIDE COUNTY TREASURER

C/O UNION BANK OF CA ST GOV

PO BOX 4035

SACRAMENTO

CA 95812 4035

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 **To** 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 13,960,897.75

Gross Claim **\$13,960,897.75**

Net Claim / Payment Amount **\$13,960,897.75**

YTD Amount: **\$55,867,965.09**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A

PAYMENT ISSUE DATE: 02/15/2013

SACRAMENTO COUNTY TREASURER

PO BOX 980264

WEST SACRAMENTO

CA 95798 0264

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 To 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 8,604,984.52

Gross Claim \$8,604,984.52

Net Claim / Payment Amount \$8,604,984.52

YTD Amount: \$34,434,961.36

For assistance, please call: John Bodolay at (916) 323-2154

2/13/2013

Page 35 of 59

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A
PAYMENT ISSUE DATE: 02/15/2013

SAN BENITO COUNTY TREASURER

COURTHOUSE
440 FIFTH ST RM 107
HOLLISTER

CA 95023

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 **To** 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 535,259.85

Gross Claim **\$535,259.85**

Net Claim / Payment Amount **\$535,259.85**

YTD Amount: **\$2,141,973.87**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A

PAYMENT ISSUE DATE: 02/15/2013

SAN BERNARDINO CO TREASURER

PO BOX 1859

SACRAMENTO

CA 95812

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 To 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 14,130,492.56

Gross Claim \$14,130,492.56

Net Claim / Payment Amount \$14,130,492.56

YTD Amount: \$56,546,640.41

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A
PAYMENT ISSUE DATE: 02/15/2013

SAN DIEGO COUNTY TREASURER
PO BOX 980304

WEST SACRAMENTO CA 95798 0304

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 To 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 21,944,521.06

Gross Claim \$21,944,521.06

Net Claim / Payment Amount \$21,944,521.06

YTD Amount: \$87,816,396.80

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A

PAYMENT ISSUE DATE: 02/15/2013

SAN FRANCISCO COUNTY TREASURER

PO BOX 2920

SACRAMENTO

CA 95814 2920

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 To 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 4,971,379.64

Gross Claim \$4,971,379.64

Net Claim / Payment Amount \$4,971,379.64

YTD Amount: \$19,894,197.99

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A
PAYMENT ISSUE DATE: 02/15/2013

SAN JOAQUIN COUNTY TREASURER
PO BOX 981355

WEST SACRAMENTO CA 95798 1355

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 To 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 4,523,128.84

Gross Claim \$4,523,128.84

Net Claim / Payment Amount \$4,523,128.84

YTD Amount: \$18,100,412.20

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A
PAYMENT ISSUE DATE: 02/15/2013

SAN LUIS OBISPO COUNTY TREASURER
PO BOX 1149

SAN LUIS OBISPO CA 93406

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 To 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 1,824,450.81

Gross Claim \$1,824,450.81

Net Claim / Payment Amount \$1,824,450.81

YTD Amount: \$7,300,988.51

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A
PAYMENT ISSUE DATE: 02/15/2013

SAN MATEO COUNTY TREASURER

C/O UNION BANK ST GOVT DEPT

PO BOX 4035

Sacramento

CA 95812

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 **To** 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 4,369,026.22

Gross Claim **\$4,369,026.22**

Net Claim / Payment Amount **\$4,369,026.22**

YTD Amount: **\$17,483,732.70**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A
PAYMENT ISSUE DATE: 02/15/2013

SANTA BARBARA COUNTY TREASURER
PO BOX 579

SANTA BARBARA CA 93102

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 To 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 3,109,933.39

Gross Claim \$3,109,933.39

Net Claim / Payment Amount \$3,109,933.39

YTD Amount: \$12,445,163.13

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A
PAYMENT ISSUE DATE: 02/15/2013

SANTA CLARA CO TREASURER
PO BOX 1406

SACRAMENTO

CA 95812

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 To 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 12,307,634.88

Gross Claim **\$12,307,634.88**

Net Claim / Payment Amount **\$12,307,634.88**

YTD Amount: **\$49,252,027.22**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A

PAYMENT ISSUE DATE: 02/15/2013

SANTA CRUZ COUNTY TREASURER

PO BOX 1817

SANTA CRUZ

CA 95061

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 To 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 1,976,467.62

Gross Claim \$1,976,467.62

Net Claim / Payment Amount \$1,976,467.62

YTD Amount: \$7,909,321.17

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A

PAYMENT ISSUE DATE: 02/15/2013

SHASTA COUNTY TREASURER

PO BOX 1859

SACRAMENTO

CA 95812 1859

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 To 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 1,299,847.53

Gross Claim \$1,299,847.53

Net Claim / Payment Amount \$1,299,847.53

YTD Amount: \$5,201,659.52

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A
PAYMENT ISSUE DATE: 02/15/2013

SIERRA COUNTY TREASURER
PO BOX 376

DOWNIEVILLE

CA 95936 0376

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 To 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 249,489.65

Gross Claim \$249,489.65

Net Claim / Payment Amount \$249,489.65

YTD Amount: \$998,394.18

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A

PAYMENT ISSUE DATE: 02/15/2013

SISKIYOU COUNTY TREASURER

311 FOURTH ST RM 104

YREKA

CA 96097

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 To 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 463,740.32

Gross Claim \$463,740.32

Net Claim / Payment Amount \$463,740.32

YTD Amount: \$1,855,770.91

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A

PAYMENT ISSUE DATE: 02/15/2013

SOLANO COUNTY T TC

675 TEXAS ST STE 1900

FAIRFIELD

CA 94533 6337

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 **To** 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 2,710,212.83

Gross Claim **\$2,710,212.83**

Net Claim / Payment Amount **\$2,710,212.83**

YTD Amount: **\$10,845,583.04**

For assistance, please call: John Bodolay at (916) 323-2154

2/13/2013

Page 49 of 59

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A

PAYMENT ISSUE DATE: 02/15/2013

SONOMA COUNTY TREASURER

PO BOX 1204

SACRAMENTO

CA 95812 1204

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 To 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 3,045,201.40

Gross Claim \$3,045,201.40

Net Claim / Payment Amount \$3,045,201.40

YTD Amount: \$12,186,122.17

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A

PAYMENT ISSUE DATE: 02/15/2013

STANISLAUS COUNTY TREASURER

PO BOX 3052

MODESTO

CA 95353 3052

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 To 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 3,451,540.81

Gross Claim \$3,451,540.81

Net Claim / Payment Amount \$3,451,540.81

YTD Amount: \$13,812,189.23

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A

PAYMENT ISSUE DATE: 02/15/2013

SUTTER COUNTY TREASURER

PO BOX 546

YUBA CITY

CA 95992

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 To 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 1,280,017.74

Gross Claim \$1,280,017.74

Net Claim / Payment Amount \$1,280,017.74

YTD Amount: \$4,118,178.04

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A

PAYMENT ISSUE DATE: 02/15/2013

TEHAMA COUNTY TREASURER

PO BOX 1150

RED BLUFF

CA 96080

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 To 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 537,235.86

Gross Claim \$537,235.86

Net Claim / Payment Amount \$537,235.86

YTD Amount: \$2,149,881.40

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A
PAYMENT ISSUE DATE: 02/15/2013

TRI CITY MENTAL HEALTH
2008 N GAREY AVENUE

POMONA

CA 91767

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 To 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 1,492,704.73

Gross Claim \$1,492,704.73

Net Claim / Payment Amount \$1,492,704.73

YTD Amount: \$5,973,424.99

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A

PAYMENT ISSUE DATE: 02/15/2013

TRINITY CO TREASURER

PO BOX 1297

WEAVERVILLE

CA 96093 1297

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 To 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 275,855.30

Gross Claim \$275,855.30

Net Claim / Payment Amount \$275,855.30

YTD Amount: \$1,103,902.81

For assistance, please call: John Bodolay at (916) 323-2154

2/13/2013

Page 55 of 59

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A
PAYMENT ISSUE DATE: 02/15/2013

TULARE COUNTY TREASURER
COUNTY CIVIC CENTER RM 103E
221 SOUTH MOONEY BL
VISALIA CA 93291

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 **To** 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 3,267,993.39

Gross Claim \$3,267,993.39

Net Claim / Payment Amount \$3,267,993.39

YTD Amount: \$13,077,679.09

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A
PAYMENT ISSUE DATE: 02/15/2013

TUOLUMNE COUNTY TREASURER
2 SOUTH GREEN ST

SONORA

CA 95370

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 To 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 513,397.81

Gross Claim \$513,397.81

Net Claim / Payment Amount \$513,397.81

YTD Amount: \$2,054,487.56

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A

PAYMENT ISSUE DATE: 02/15/2013

VENTURA COUNTY TREASURER

C/O WELLS FARGO BANK

PO BOX 980307

WEST SACRAMENTO

CA 95798 0307

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 **To** 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 5,574,889.74

Gross Claim **\$5,574,889.74**

Net Claim / Payment Amount **\$5,574,889.74**

YTD Amount: **\$22,309,292.07**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200197A

PAYMENT ISSUE DATE: 02/15/2013

YOLO COUNTY TREASURER

PO BOX 1995

WOODLAND

CA 95695

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 01/01/2013 To 01/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 1,454,887.28

Gross Claim **\$1,454,887.28**

Net Claim / Payment Amount **\$1,454,887.28**

YTD Amount: **\$5,822,089.20**